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26868 7590 09/02/2011 Hasse & Nesbitt LLC 8837 Chapel Square Drive Suite C CINCINNATI, OH 45249				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
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APPLICATION NO.	FILING DATE	FILING DATE			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/593,052 06/05/2007		Jianjun Cul		LED-003	7244	
TITLE OF INVENTION: MYOPIA THERAPY APPLIANCE AND A BLINDER WITH SAID APPLIANCE						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	E DATE DUE
nonprovisional	YES	S755 \$870	\$300	\$0	\$1055	12/02/2011
EXAM	INER	ART UNIT	CLASS-SUBCLASS	]		
MATTER, KRISTEN CLARETTE 3771		601-013000				
1. Change of correspondence address or Indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)			
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			ib. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card.  The Director Is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the						
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Authorized Signature	Not	A	Date October 25, 2011			
Typed or printed name Daniel F. Nesbitt			Registration No. 33,746			
an application. Confident submitting the completes this form and/or suggesti Box 1450, Alexandria, V	tiality is governed by 33 d application form to the ons for reducing this bu 'irginia 22313-1450. DC 13-1450	USPTO. Time will vary rden, should be sent to th NOT SEND FEES OR (	depending upon the indi depending upon the indi e Chief Information Offic COMPLETED FORMS T	vidual case. Any co er, U.S. Patent and O THIS ADDRESS	mments on the amount of t	nd by the USPTO to process) ing gathering, preparing, and itime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, ol number.